The LTRMP continues to be the most consistent, comprehensive large river monitoring program in the world. More than 200,000 data observations have been collected to evaluate important short- and long-term changes associated with ecological components of the UMRS.

On multiple occasions, I toured this amazing facility and witnessed the ongoing and award-winning research. I am proud to have it not only in my district, but in my hometown.

## THE OMNIBUS AUTISM HEARINGS

### HON. DAN BURTON

OF INDIANA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, June 19, 2007*

Mr. BURTON of Indiana. Madam Speaker, I rise tonight to talk about the Omnibus Autism Hearing which started on June 11, 2007, down at the U.S. Federal Claims Court here in Washington, DC. At issue are the 4,800 claims against the National Vaccine Injury Compensation Program filed by parents of autistic children who believe, as I do, that thimerosal—the mercury-based preservative in vaccines—caused their children's disorders.

There are many people in our health agencies, in the pharmaceutical industry and here in Congress who say that there is no the scientific evidence linking thimerosal and autism. However, during my tenure as chairman of Government Reform Committee (1997–2002), and as chairman of the Subcommittee on Human Rights and Wellness (2003–2005), I chaired numerous hearings examining the alarming increase in autism in this country over the last several decades. In the 1980s, roughly one in 10,000 American children was diagnosed with some kind of autism spectrum disorder. Today that number has risen to 1 in 150. I believe, as do many credible scientists and researchers, that the clear correlation between the dramatic rise in the number of autism cases, and the rapid expansion of the childhood vaccination schedule during that 20-year period, points to the mercury-based preservative thimerosal—routinely used in pediatric vaccines during the period—as a contributing factor to our country's literal epidemic of autism. In fact, I firmly believe my own grandson became autistic after receiving nine shots in 1 day, seven of which contained thimerosal. In fact, Dr. Bernard Rimland—founder and director of the Autism Research Institute—testified before the committee that classic autism, (noticeable from birth) has largely been replaced by late-onset or ''acquired autism''; a form of autism in which children are born normally developing but later regress into autism in the second year of life. He was one of the first to point to environmental insult through vaccine injury as a possible leading contributing factor.

The truth is that since the initiation of my vaccine investigation, two schools of science have evolved leading to two very different conclusions. The first, largely funded by the Centers for Disease Control, consist of epidemiological evaluations in Denmark that look at medical files in individuals who developed autism and deciding whether or not thimerosal exposure was more predominant in the autism patients. Those who have focused solely on the epidemiology research have concluded that there is no relationship between vaccine injury and the onset of autism. However, once published, these studies were discovered to have many methodological flaws. For example, using individuals in Denmark did not provide a true comparison to the U.S. vaccine schedule, and by the CDC's own admission, the study could not really provide any true conclusion as to whether or not a subset of the population—because of vaccine exposure to mercury or some other vaccine injury—developed autism.

The second school of research has conducted so-called ''hard'' science; providing objective measures through laboratory and animal research. For example, Dr. Hornig at Columbia University replicated the thimerosal exposure in vaccines in a mouse study and discovered mice exposed to thimerosal had both behavioral and biological responses—displaying autism like behaviors and exhibiting white matter changes in the brain that were measurable. Other laboratory research has shown that thimerosal exposure affects the protective sheath of the neurofibrals in the brain as well as the IGF–I molecule. And Dr. Jill James at the University of Arkansas has shown that thimerosal exposure affects the methylation process—the mechanism used to regulate genes and protect DNA from some types of damage.

The most recent hard science study to be published is from Dr. Burbacher, a leading expert on mercury, who investigated the different affect methyl mercury and ethyl mercury had on primates. He found that ethylmercury—the form of mercury in thimerosal—stays in the brain (doing more harm) than methylmercury.

The bottom line is that mercury is a base element and the most toxic substance known to science outside of radioactive materials; and each of these hard science studies, and more, show that it is biologically plausible for mercury exposure in vaccines to cause the onset of autism and provide tantalizing pieces in the puzzle about how.

My support for the link between thimerosal and autism, especially in open congressional hearings has caused many people to throw around the accusation that I am ''anti-vaccine.'' My response to that is that vaccines are the only medications that are mandatory for Americans to receive and as such we have an even greater obligation to ensure that they are as safe as possible. In addition, experience tells us that, as with any other epidemic, while there may be underlying genetic susceptibilities, there usually is some type of environmental trigger as well, such as a virus, fungus, exposure to heavy metals, pollutants, or whatever. There has never, to the best of my knowledge, been a purely genetic epidemic. So, genetics alone simply cannot explain how we went from 1 in 10,000 children with autism spectrum disorders 20 years ago to 1 in 150 today.

No one has ever identified a positive health benefit to mercury in the human body. Thus, it was sound public health policy to eliminate mercury from thermometers, blood pressure gauges, light switches, cosmetics, teething powder, horse liniment, hat-making materials, smokestack emission, and mining operations. It would also be sound public health policy to eliminate mercury from all vaccines.

But Madam Speaker, getting the mercury out of all vaccines is only the first step. We also have a responsibility to help all of the children who have already been injured by mercury in vaccines. That is why the outcome of the Omnibus Autism Hearing is so critically important. In the 1980s, Congress creating the Vaccine Injury Compensation Program to shield medical professionals and vaccine manufacturers from liability if an individual suffered an adverse event from receiving vaccines. The compensation fund, which currently contains about $2.5 billion, is financed by a tax on pediatric vaccines. We created VICP to protect the vaccine supply and to insure that all who were injured by a vaccine would receive compensation in what was supposed to be a no-fault, easy to use manner. Congress intended for families to be compensated quickly and fairly; and when the evidence was close as to whether or not the medical condition in question was vaccine related or not—as is the case with thimerosal—the court should always err in favor of the injured. But over the years the system has broken and what was supposed to be quick and fair has become slow and contentious; which is why today 4,800 families are fighting in court to be heard. They have waited a long time for their day in court and I am pleased that the court is providing the transcripts online quickly and that audio streaming on the internet is being provided for the thousands of families who are not able to travel to Washington and actually be in the courtroom during the proceedings.

As the Omnibus hearings proceed, I hope that all of the evidence regarding vaccine injury will be received by the courts and given a full and fair review. I believe the families of these autistic children deserve to be compensated for their vaccine injury as Congress intended when it created VICP. I believe the science is there to prove this case and I am hopeful that the court will agree and at the end of this arduous process these 4,800 families will finally get justice.

## ARC FUNDING

### HON. NICK J. RAHALL II

OF WEST VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, June 19, 2007*

Mr. RAHALL. Madam Speaker, ''a rising tide,'' President Kennedy told us, ''lifts all boats.'' And so one of President Kennedy's legacies was created in 1965 with a unique mission to serve a unique part of the Nation, the Appalachian region.

Historically, the counties of Appalachia have ''faced high levels of poverty and economic distress resulting from geographic isolation and inadequate infrastructure.''

It was with these concerns in mind that ARC was created and it is these concerns ARC has been addressing vigorously for the past 40 years.

Take for example the area of transportation, a major focus for ARC. ARC was developed, in part, because of the severe isolation experienced in Appalachia and that in order to develop Appalachia and give its people an opportunity to compete, a system of highways was needed. Enter the Appalachian Development Highway System, which was created to serve the transportation needs of Appalachian residents by assisting in the construction of highways so critically needed by Appalachian communities for economic growth and development.